Under the Paperwork Reduction Act of 1995, no persons are regulard to respond to a collection of information unless & displays a wall OMB control number.											
PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Doctor Humber		
CLAIMS AS FILED - PART I							SMALL ENTITY		<i>u</i> . —		R TI IAN
			olumn 1)		(Column 2)		SMALL	ENIIIY	OR Ti	SMALL	ENTITY
BA	FOR SIC FEE	KUK	MOERTRED NU		UMBER EKIR		RATE	166]	RATE	FEE
(37	CFR 1.16(4))							1	On		1
-	CFR 1.10(c)		minus 20 «				k 1 •		1		
HIDEPENDENT CLAHAS		MIAS	minus	minus) ·		$\neg \uparrow$				X 1	
		DENT CLAIM PRES				-	X 1	 	OR	K 1	
MULTIPLE DEPENDENT CLAIM PRESCHT (37 CFR 1 16(d))							11		Oit	11	
" If the difference in column t is loss than zero, enter "O" in column ?							ιλτότ		OR	IOIAL	L
	(CLAIMS AS AF	MENDE	O ~ PART II							
18-14-05 (Column 1) (Column 2) (Column 3)						n)}	SMALL	ENTITY	OIC ;		R THAN ENTITY
AMENDMENT A		CLAIMS REMAINING		HIGHES		ENT	HALE		1		
		AFTER AMENDMENT		PREVIOUS PAID FOI	LY EXT		1000	TIONAL.		RATE	ADDI TIONAL FEE
	(3) CH 1 ICH	19	Minus	33	1	=	1,25		OR	x,50.	1,55
	Independent .	3	Minus	5	1.	一	x1/00.		OR	1, 200	
	TIRST PRESCRIATION OF MULTURE DEPENDENT QUAM (31 CFR 1 16(d))						+, .		011	1.	
							TOTAL ADD'L FEE			101AL	
		(Column 1)		(Column		<u> </u>	0	~00CTEC . [:		
<u> </u>	•	CLAHAS	Τ	HIGHEST		177			1	r 	
8		REMAINING		NUMBER			RATE	ADDI.		RATE	ADDI
Z		AMCHOMCI:1		PAIDEOR		^	j	110NAL FEE		i	11084:
AMENOMEN	total ()) ((4) ()(()	·	Minus		7	- ·					166
	Independent (1): (f 6) 16(t)		Minus		- 		* 5 =		OK	. s:	
		<u> </u>	<u></u>	<u> </u>	L		x 2:	:	OR.). \$:	·
	THIS I PRESENTATION OF YOUTHOUT DEPENDENT QUAIN (3) CER I TEIGH						15		Gt.	4 5	
						•	TOTAL ADD'L FEE		Or.	TOTAL ADD L FEL	
		(Colonia 1)		(Column 2) (Cetumn	. 11			•		
\Box		CLAIMS	<u> </u>	HIGHEST	, (50.5		r		ſ		
		REMAINING ALTER		REVIOUS	Y TRUSC Y TYPE		RATE	A00i- Lional		RATE	ADDI TIONAL
Z L	1 64.41	A the Circumstant	Linus	PAID FOR				F66			r€€
śL	(** (* * * * * * * * * * * * * * * * *				· .]	۱ <u>۱</u> :		OS	A. \$ =	
	ושברבישביו ושברבישביו	•	ldinus	•	: .	7	x \$=		OB	k 5 :	
TIRST PRESENTATION OF MULTIPLE DEPENDENT QUIM (3) CFR 1 16(0))									Ott		
			en E	TOTAL							
	W 41 4	Lump Lucloss (b.)					ADDITEC	<u>·· ·</u>]	1	∗öörtti [

* If the entry in column 1 is less than the entry in column 2, while 0 in column 3.

** If the [Highest Number Pressously Paid For IN THIS SPACE is less than 3, enter 3.

** If the "Highest Number Pressously Paid For IN THIS SPACE is less than 3, enter 3.

** If the "Highest Number Pressously Paid For II chall or Independentlys the highest number found in the appropriate hor in column 3.

** This Highest Number Pressously Paid For II chall or Independentlys the highest number found in the appropriate hor in column 3.

** This Highest Number Pressously Paid For II chall or Independentlys the highest number found in the appropriate hor in column 3.

** This Highest Number Pressously Paid For II chall or Independentlys the highest number found in the appropriate hor in column 3.

** This Highest Number Pressously Paid For II chall or Independently in the 15 Paid with a challenge in th including pathering, diseasing and submilling the completed application form the tim USP10. Time will vary depending resolution associated was any comment on the amount of time you require to complete this time and/or suggestions for reducing this burder's should be sent to the Chef internation (Micro U.S. Patent, and Trademan Office), U.S. Department of Commerce, C.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FECS OR County FIED LOGICES. TO THIS ADDRESS. SEND TO; Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

They were assistance in completing the form, (a) 1,800-P10-\$199 and solder option?